

AO 440 (Rev. 10/93) Summons in a Civil Action

## United States District Court

DISTRICT OF MASSACHUSETTS

UNITED STATES OF AMERICA,

v.

PHILIP N. CHIOTELLIS, M.D. and  
CARDIAC REHABILITATION OF CAPE COD,  
INC.,

## SUMMONS IN A CIVIL CASE

CASE NUMBER:

RWZ

05 11255 MLW

TO: (Name and address of defendant)

CARDIAC REHABILITATION OF CAPE COD, INC.  
c/o Thomas S. Crane, Esq.  
Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.  
One Financial Center, Boston, MA 02111

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

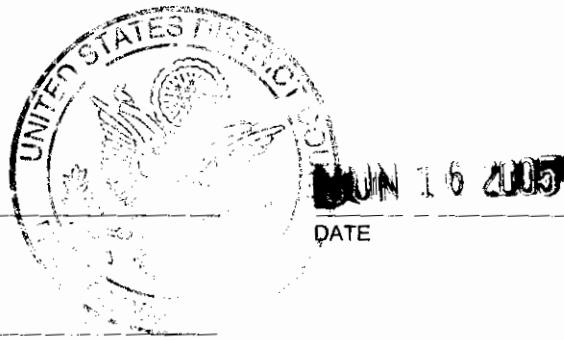
Patricia M. Connolly, AUSA  
U.S. Attorney's Office  
John Joseph Moakley U.S. Courthouse  
1 Courthouse Way, Suite 9200  
Boston, MA 02210

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

SARAH A. THORNTON

CLERK

(BY) DEPUTY CLERK



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## RETURN OF SERVICE

Service of the Summons and Complaint was made by me <sup>1</sup>	DATE
NAME OF SERVER (PRINT)	TITLE

Check one box below to indicate appropriate method of service

Served personally upon the defendant. Place where served: \_\_\_\_\_

Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.  
Name of person with whom the summons and complaint were left: \_\_\_\_\_

Returned unexecuted: \_\_\_\_\_

Other (specify) *Received Complaint by Certified Mail  
On June 26, 2005  
Travis S. Crane*

## STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL
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## DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on \_\_\_\_\_

Date \_\_\_\_\_

Signature of Server \_\_\_\_\_

Address of Server \_\_\_\_\_

SCANNED  
DATE: 6-27-05  
BY: JM